

Work Order ID 87334

July-13-12 1:10:28 PM

U/R

87334

Page 1

Item ID: D350-748-101

Revision ID: U/R

Item Name: Crosstube Installation, High Fwd

Start Date: 7/10/12 Start Qty: 1.00

Required Date: 9/28/12 Req'd Qty: 1.00

Reference:

Approvals: Process Plan: MLJ

Date: 12/07/16 Tooling:

Date:

QC: _____

Date: _____ SPC (Y/N): _____

Date:

N900040100

Setup Start ***NS1***

Stop ***NS2***

Cust Item ID:

Customer:

Run Start ***NR1***

Stop ***NR2***

Sequence ID/ Work Center ID	Operation Description	Set Up/ Run Hours	Tool ID	Tool #	Plan Code	Accept Qty	Reject Qty	Reject Number	Insp. Stamp
Draw Nbr	Revision Nbr								
D350-748-141	F U/R <u>OK</u> <u>9/12/7/16</u>								
100		0.00							
100	DOCUMENT CONTROL								
DC	Memo	0.00							
Document Control	Photocopy bluefile & type labels per PPPD350-748-101								
110		0.00							
110	BENDING MACHINE - CROSSTUBES								
CNC Bend I	Memo	0.00							
CNC Delta 100 Bender	Bend tube as per Dwg D350-748-141 using CNC bender program D350F and Folio FT								
	UNDER BEND .225" PER SIDE								
120		0.00							
120	Crosstube Dimensional Check								
QC	Memo	0.00							
Quality Control									

SCRAP

DP 13-1-30

1:02pm -> 1:58pm

DAS
16
9-83

13/2/6

NCR: Yes / No

WORK ORDER NON-CONFORMANCE / UPDATE

DQA: _____ Date: _____

QA Closed: _____ Date: _____

Work Order: _____ Part No. _____ NCR No. _____				DISPOSITION Rework <input type="checkbox"/> Scrap <input type="checkbox"/> Use-as-is <input type="checkbox"/> Work Order Update <input type="checkbox"/>		AGAINST DEPARTMENT/PROCESS <div style="display: flex; justify-content: space-between;"> <div> Skid-tube <input type="checkbox"/> Machining <input type="checkbox"/> Thermoforming <input type="checkbox"/> Large Fab <input type="checkbox"/> </div> <div> Crosstube <input type="checkbox"/> Small Fab <input type="checkbox"/> Finishing <input type="checkbox"/> Composite <input type="checkbox"/> </div> <div> Water Jet <input type="checkbox"/> Prod. Eng. Coord. <input type="checkbox"/> Rec/Store/Packaging <input type="checkbox"/> Supplier <input type="checkbox"/> </div> <div> Engineering <input type="checkbox"/> Quality <input type="checkbox"/> Other <input type="checkbox"/> </div> </div>					
Root Cause	Date	Step	Qty	Description of work order update or Non-conformance	Initial Chief Eng	Action Description	Sign & Date	Verification	QC Inspector		
Doc/Data <input type="checkbox"/>											
Equip/Tooling <input type="checkbox"/>											
Operator <input type="checkbox"/>											
Material <input type="checkbox"/>											
Setup <input type="checkbox"/>											
Other <input type="checkbox"/>											
Process <input type="checkbox"/>											
Supplier <input type="checkbox"/>											
Training <input type="checkbox"/>											
Unapproved <input type="checkbox"/>											
FAULT CATEGORY											
Landing Gear <input type="checkbox"/> Bending <input type="checkbox"/> Centre Not Concentric to O/S <input type="checkbox"/> Cracks <input type="checkbox"/> Crushed/Crimped. <input type="checkbox"/> Cuffs <input type="checkbox"/> Heat Treat <input type="checkbox"/> Inspection Strip in Tube <input type="checkbox"/> Ripples in Bend <input type="checkbox"/> Torque Waves in Extrusion <input type="checkbox"/> Turning Sequence <input type="checkbox"/> Wave/Twist in Tube			General <input type="checkbox"/> Bend <input type="checkbox"/> BOM/Route <input type="checkbox"/> Broken/Damaged <input type="checkbox"/> Burrs <input type="checkbox"/> Contamination <input type="checkbox"/> Countersink <input type="checkbox"/> Cut Too Short <input type="checkbox"/> Drill Holes <input type="checkbox"/> Drawing <input type="checkbox"/> Finish <input type="checkbox"/> Folio			<input type="checkbox"/> Grain <input type="checkbox"/> Hardware <input type="checkbox"/> Inspection Incomplete <input type="checkbox"/> Instructions Incomplete/Unclear <input type="checkbox"/> Maintenance <input type="checkbox"/> Mislabeled <input type="checkbox"/> Misread <input type="checkbox"/> Offset <input type="checkbox"/> Out of Calibration <input type="checkbox"/> Out of Sequence <input type="checkbox"/> Outside Dimensions			<input type="checkbox"/> Ovalized <input type="checkbox"/> Over/Under tolerance <input type="checkbox"/> Part Incorrect <input type="checkbox"/> Part Lost/Missing <input type="checkbox"/> Part Moved <input type="checkbox"/> Positioned Wrong <input type="checkbox"/> Power Loss/Surge <input type="checkbox"/> Pressure/Forced <input type="checkbox"/> Temperature/Cure <input type="checkbox"/> Weld <input type="checkbox"/> Wrong Stock Pulled <input type="checkbox"/> Other		

Work Order ID 87334

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July-13-12 1:10:28 PM

Item ID: D350-748-101 Accept ***N900040100*** Setup Start ***NS1***
 Revision ID: U/R Stop ***NS2***
 Item Name: Crosstube Installation, High Fwd
 Start Date: 7/10/12 Start Qty: 1.00 ***1*** Cust Item ID:
 Required Date: 9/28/12 Req'd Qty: 1.00 ***1*** Customer:
 Reference:

Approvals: Process Plan: _____ Date: _____ Tooling: _____ Date: _____ Run Start ***NR1***
 QC: _____ Date: _____ SPC (Y/N): _____ Date: _____ Stop ***NR2***

Sequence ID/ Work Center ID	Operation Description	Set Up/ Run Hours	Tool ID	Tool #	Plan Code	Accept Qty	Reject Qty	Reject Number	Insp. Stamp
125		0.00							
125									
HandFXtube	Memo	0.00							
Hand Finishing Crosstubes	***Stress relief*** Heat treat crosstube as per QSI010 4.3 Temp: _____ Start time: _____ Finish time: _____								
127		0.00							
127									
QC	QC Inspect dimensions to drawing	0.00							
Quality Control	Memo	0.00							

CEL 13/01/31 ①

*P/O: 18998
metcar*

*DAS 16
9-33 13/2/6
(6013-a-01)*

*Review + Inspect
Ensure CQ C attached*

13/2/6 ①

POSITIVE RECALL

EFFECTIVE 13.01.23 AUTH UP
 RELEASED UP DATE 13/2/6
Eng Approval
Straightness OP
@ HT

126

NCR: Yes / No

WORK ORDER NON-CONFORMANCE / UPDATE

DQA: _____ Date: _____

QA Closed: _____ Date: _____

Work Order: _____ Part No. _____ NCR No. _____				DISPOSITION Rework <input type="checkbox"/> Scrap <input type="checkbox"/> Use-as-is <input type="checkbox"/> Work Order Update <input type="checkbox"/>		AGAINST DEPARTMENT/PROCESS <div style="display: flex; justify-content: space-between;"> <div> Skid-tube <input type="checkbox"/> Machining <input type="checkbox"/> Thermoforming <input type="checkbox"/> Large Fab <input type="checkbox"/> </div> <div> Crosstube <input type="checkbox"/> Small Fab <input type="checkbox"/> Finishing <input type="checkbox"/> Composite <input type="checkbox"/> </div> <div> Water Jet <input type="checkbox"/> Prod. Eng. Coord. <input type="checkbox"/> Rec/Store/Packaging <input type="checkbox"/> Supplier <input type="checkbox"/> </div> <div> Engineering <input type="checkbox"/> Quality <input type="checkbox"/> Other <input type="checkbox"/> </div> </div>					
Root Cause	Date	Step	Qty	Description of work order update or Non-conformance	Initial Chief Eng	Action Description	Sign & Date	Verification	QC Inspector		
Doc/Data											
Equip/Tooling											
Operator											
Material											
Setup											
Other											
Process											
Supplier											
Training											
Unapproved											

FAULT CATEGORY											
Landing Gear <input type="checkbox"/> Bending <input type="checkbox"/> Centre Not Concentric to O/S <input type="checkbox"/> Cracks <input type="checkbox"/> Crushed/Crimped. <input type="checkbox"/> Cuffs <input type="checkbox"/> Heat Treat <input type="checkbox"/> Inspection Strip in Tube <input type="checkbox"/> Ripples in Bend <input type="checkbox"/> Torque Waves in Extrusion <input type="checkbox"/> Turning Sequence <input type="checkbox"/> Wave/Twist in Tube			General <input type="checkbox"/> Bend <input type="checkbox"/> BOM/Route <input type="checkbox"/> Broken/Damaged <input type="checkbox"/> Burrs <input type="checkbox"/> Contamination <input type="checkbox"/> Countersink <input type="checkbox"/> Cut Too Short <input type="checkbox"/> Drill Holes <input type="checkbox"/> Drawing <input type="checkbox"/> Finish <input type="checkbox"/> Folio			<input type="checkbox"/> Grain <input type="checkbox"/> Hardware <input type="checkbox"/> Inspection Incomplete <input type="checkbox"/> Instructions Incomplete/Unclear <input type="checkbox"/> Maintenance <input type="checkbox"/> Mislabeled <input type="checkbox"/> Misread <input type="checkbox"/> Offset <input type="checkbox"/> Out of Calibration <input type="checkbox"/> Out of Sequence <input type="checkbox"/> Outside Dimensions			<input type="checkbox"/> Ovalized <input type="checkbox"/> Over/Under tolerance <input type="checkbox"/> Part Incorrect <input type="checkbox"/> Part Lost/Missing <input type="checkbox"/> Part Moved <input type="checkbox"/> Positioned Wrong <input type="checkbox"/> Power Loss/Surge		<input type="checkbox"/> Pressure/Forced <input type="checkbox"/> Temperature/Cure <input type="checkbox"/> Weld <input type="checkbox"/> Wrong Stock Pulled <input type="checkbox"/> Other

Work Order ID 87334

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Page 3

July-13-12 1:10:28 PM

Item ID: D350-748-101 Accept ***N900040100*** Setup Start ***NS1***
 Revision ID: U/R Stop ***NS2***
 Item Name: Crosstube Installation, High Fwd
 Start Date: 7/10/12 Start Qty: 1.00 ***1*** Cust Item ID:
 Required Date: 9/28/12 Req'd Qty: 1.00 ***1*** Customer:
 Reference:

Approvals: Process Plan: _____ Date: _____ Tooling: _____ Date: _____ Run Start ***NR1***
 QC: _____ Date: _____ SPC (Y/N): _____ Date: _____ Stop ***NR2***

Sequence ID/ Work Center ID	Operation Description	Set Up/ Run Hours	Tool ID	Tool #	Plan Code	Accept Qty	Reject Qty	Reject Number	Insp. Stamp
130	Crosstubes	0.00							
130									
Crosstubes	Memo	0.00							
Crosstubes	1-Drill Tube as per Dwg D350-748-141 Using DT8876 A,B & C Drill Jigs, Set-up drill table as per QSI 010								
	2-Deburr								
	3-Engrave Part # and Batch # as per Dwg D350-748-141								
	4-Remove all marks from tube within limits of D350-748-141								
	5- Apply a light coat of LPS3 on the interior of tube Batch: _____								
140	QC5- Inspect part completeness to step on W/O	0.00							
140									
QC	Memo	0.00							
Quality Control	CHECK 10 DEG HOLES WITH DT8876E (EUROCOPTER CLAMP)								

MO/RM 13/02/07

JW 13-02-07

DA 15 13-02-07

1

NCR: Yes / No

WORK ORDER NON-CONFORMANCE / UPDATE

DQA: _____ Date: _____

QA Closed: _____ Date: _____

Work Order: _____ Part No. _____ NCR No. _____				DISPOSITION Rework <input type="checkbox"/> Scrap <input type="checkbox"/> Use-as-is <input type="checkbox"/> Work Order Update <input type="checkbox"/>		AGAINST DEPARTMENT/PROCESS <div style="display: flex; justify-content: space-between;"> <div> Skid-tube <input type="checkbox"/> Machining <input type="checkbox"/> Thermoforming <input type="checkbox"/> Large Fab <input type="checkbox"/> </div> <div> Crosstube <input type="checkbox"/> Small Fab <input type="checkbox"/> Finishing <input type="checkbox"/> Composite <input type="checkbox"/> </div> <div> Water Jet <input type="checkbox"/> Prod. Eng. Coord. <input type="checkbox"/> Rec/Store/Packaging <input type="checkbox"/> Supplier <input type="checkbox"/> </div> <div> Engineering <input type="checkbox"/> Quality <input type="checkbox"/> Other <input type="checkbox"/> </div> </div>					
Root Cause	Date	Step	Qty	Description of work order update or Non-conformance	Initial Chief Eng	Action Description	Sign & Date	Verification	QC Inspector		
Doc/Data <input type="checkbox"/>											
Equip/Tooling <input type="checkbox"/>											
Operator <input type="checkbox"/>											
Material <input type="checkbox"/>											
Setup <input type="checkbox"/>											
Other <input type="checkbox"/>											
Process <input type="checkbox"/>											
Supplier <input type="checkbox"/>											
Training <input type="checkbox"/>											
Unapproved <input type="checkbox"/>											
FAULT CATEGORY											
Landing Gear <input type="checkbox"/> Bending <input type="checkbox"/> Centre Not Concentric to O/S <input type="checkbox"/> Cracks <input type="checkbox"/> Crushed/Crimped. <input type="checkbox"/> Cuffs <input type="checkbox"/> Heat Treat <input type="checkbox"/> Inspection Strip in Tube <input type="checkbox"/> Ripples in Bend <input type="checkbox"/> Torque Waves in Extrusion <input type="checkbox"/> Turning Sequence <input type="checkbox"/> Wave/Twist in Tube			General <input type="checkbox"/> Bend <input type="checkbox"/> BOM/Route <input type="checkbox"/> Broken/Damaged <input type="checkbox"/> Burrs <input type="checkbox"/> Contamination <input type="checkbox"/> Countersink <input type="checkbox"/> Cut Too Short <input type="checkbox"/> Drill Holes <input type="checkbox"/> Drawing <input type="checkbox"/> Finish <input type="checkbox"/> Folio			<input type="checkbox"/> Grain <input type="checkbox"/> Hardware <input type="checkbox"/> Inspection Incomplete <input type="checkbox"/> Instructions Incomplete/Unclear <input type="checkbox"/> Maintenance <input type="checkbox"/> Mislabeled <input type="checkbox"/> Misread <input type="checkbox"/> Offset <input type="checkbox"/> Out of Calibration <input type="checkbox"/> Out of Sequence <input type="checkbox"/> Outside Dimensions			<input type="checkbox"/> Ovalized <input type="checkbox"/> Over/Under tolerance <input type="checkbox"/> Part Incorrect <input type="checkbox"/> Part Lost/Missing <input type="checkbox"/> Part Moved <input type="checkbox"/> Positioned Wrong <input type="checkbox"/> Power Loss/Surge <input type="checkbox"/> Pressure/Forced <input type="checkbox"/> Temperature/Cure <input type="checkbox"/> Weld <input type="checkbox"/> Wrong Stock Pulled <input type="checkbox"/> Other		

Work Order ID 87334

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July-13-12 1:10:28 PM

Item ID: D350-748-101 Accept ***N900040100*** Setup Start ***NS1***
 Revision ID: U/R Stop ***NS2***
 Item Name: Crosstube Installation, High Fwd
 Start Date: 7/10/12 Start Qty: 1.00 ***1*** Cust Item ID:
 Required Date: 9/28/12 Req'd Qty: 1.00 ***1*** Customer:
 Reference:

Approvals: Process Plan: _____ Date: _____ Tooling: _____ Date: _____ Run Start ***NR1***
 QC: _____ Date: _____ SPC (Y/N): _____ Date: _____ Stop ***NR2***

Sequence ID/ Work Center ID	Operation Description	Set Up/ Run Hours	Tool ID	Tool #	Plan Code	Accept Qty	Reject Qty	Reject Number	Insp. Stamp
150	Outsource process-Cadplate per QSI017 4.1.9.1	0.00							
150									
Outsource3	Memo	0.00							
Outsource process - Cad plate	Issue P/O: <u>19086</u> Stress relief at 375° for 5 hours Magnetic Particle Inspect per ASTM E1444 Cadium Plate per AMS-QQ-P-416B, Class 1, Type 2 Embrittle relief at 375° for 8 hours, Chromate Treat Possible Supplier: Southwest United Industries Ensure Certificate of Conformity is attached								
160	Receive & Inspect for Damage & Mat'l Certs	0.00							
160									
Packaging	Memo	0.00							
Packaging	Ensure certificate of conformity is attached								
170	QC5- Inspect part completeness to step on W/O	0.00							
170									
QC	Memo	0.00							
Quality Control									

★ SEE W/B CHG ATTACHED

Pto →

NCR: Yes / No

WORK ORDER NON-CONFORMANCE / UPDATE

DQA: *[Signature]*Date: *13/04/19*QA Closed: *[Signature]*Date: *13/04/19*

Work Order: <u>27334</u> Part No. <u>D350.748.101</u> NCR No. <u>13-2515</u>				DISPOSITION Rework <input type="checkbox"/> Scrap <input checked="" type="checkbox"/> Use-as-is <input type="checkbox"/> Work Order Update <input type="checkbox"/>		AGAINST DEPARTMENT/PROCESS <div style="display: flex; justify-content: space-between;"> <div> Skid-tube <input type="checkbox"/> Machining <input type="checkbox"/> Thermoforming <input type="checkbox"/> Large Fab <input type="checkbox"/> </div> <div> Crosstube <input checked="" type="checkbox"/> Small Fab <input type="checkbox"/> Finishing <input type="checkbox"/> Composite <input type="checkbox"/> </div> <div> Water Jet <input type="checkbox"/> Prod. Eng. Coord. <input type="checkbox"/> Rec/Store/Packaging <input type="checkbox"/> Supplier <input type="checkbox"/> </div> <div> Engineering <input type="checkbox"/> Quality <input type="checkbox"/> Other <input type="checkbox"/> </div> </div>					
Root Cause	Date	Step	Qty	Description of work order update or Non-conformance	Initial Chief Eng	Action Description	Sign & Date	Verification	QC Inspector		
Doc/Data <input type="checkbox"/> Equip/Tooling <input type="checkbox"/> Operator <input type="checkbox"/> Material <input type="checkbox"/> Setup <input type="checkbox"/> Other <input type="checkbox"/> Process <input checked="" type="checkbox"/> Supplier <input type="checkbox"/> Training <input type="checkbox"/> Unapproved <input type="checkbox"/>	<i>13/03/19</i>	<i>160</i>	<i>x1</i>	<i>tube cracks at CAD Platini. due to the tube not being stress relief @ 24 hours from Bending</i>	<i>SPL</i> <i>13/04/17</i>	<i>(See NCR 13-2390)</i> <i>Scrap + Destroy</i> <i>Qn x1</i> <i>347214</i>	<i>JW</i> <i>13-04-17</i>	<i>DAS 16 9-29</i> <i>13/04/17</i>	<i>DAS 16 9-29</i> <i>13/03/19</i>		
FAULT CATEGORY											
Landing Gear <input type="checkbox"/> Bending <input type="checkbox"/> Centre Not Concentric to O/S <input type="checkbox"/> Cracks <input type="checkbox"/> Crushed/Crimped. <input type="checkbox"/> Cuffs <input type="checkbox"/> Heat Treat <input type="checkbox"/> Inspection Strip in Tube <input type="checkbox"/> Ripples in Bend <input type="checkbox"/> Torque Waves in Extrusion <input type="checkbox"/> Turning Sequence <input type="checkbox"/> Wave/Twist in Tube			General <input type="checkbox"/> Bend <input type="checkbox"/> BOM/Route <input type="checkbox"/> Broken/Damaged <input type="checkbox"/> Burrs <input type="checkbox"/> Contamination <input type="checkbox"/> Countersink <input type="checkbox"/> Cut Too Short <input type="checkbox"/> Drill Holes <input type="checkbox"/> Drawing <input type="checkbox"/> Finish <input type="checkbox"/> Folio			<input type="checkbox"/> Grain <input type="checkbox"/> Hardware <input type="checkbox"/> Inspection Incomplete <input type="checkbox"/> Instructions Incomplete/Unclear <input type="checkbox"/> Maintenance <input type="checkbox"/> Mislabeled <input type="checkbox"/> Misread <input type="checkbox"/> Offset <input type="checkbox"/> Out of Calibration <input type="checkbox"/> Out of Sequence <input type="checkbox"/> Outside Dimensions			<input type="checkbox"/> Ovalized <input type="checkbox"/> Over/Under tolerance <input type="checkbox"/> Part Incorrect <input type="checkbox"/> Part Lost/Missing <input type="checkbox"/> Part Moved <input type="checkbox"/> Positioned Wrong <input type="checkbox"/> Power Loss/Surge		<input type="checkbox"/> Pressure/Forced <input type="checkbox"/> Temperature/Cure <input type="checkbox"/> Weld <input type="checkbox"/> Wrong Stock Pulled <input type="checkbox"/> Other

Work Order ID 87334

87334

Page 5

July-13-12 1:10:28 PM

Item ID: D350-748-101

Accept

N900040100

Setup Start *NS1*

Revision ID: U/R

Stop *NS2*

Item Name: Crosstube Installation, High Fwd

Start Date: 7/10/12 Start Qty: 1.00

1

Cust Item ID:

Required Date: 9/28/12 Req'd Qty: 1.00

1

Customer:

Reference:

Approvals: Process Plan: _____ Date: _____ Tooling: _____ Date: _____

Run Start *NR1*

QC: _____ Date: _____ SPC (Y/N): _____ Date: _____

Stop *NR2*

Sequence ID/ Work Center ID	Operation Description	Set Up/ Run Hours	Tool ID	Tool #	Plan Code	Accept Qty	Reject Qty	Reject Number	Insp. Stamp
180		0.00							
180	SprayPaint								
SprayPaint	Memo	0.00							
Spray Painting	1-Prime inside crosstube as per QSI 005 4.2 2-Prime Outside of Tube as per Dart QSI 005 4.2								
190		0.00							
190	QC14- Inspect Spray Paint								
QC	Memo	0.00							
Quality Control	Then, Wrap in plastic bag to protect from scratches								
200		0.00							
200	Crosstubes								
Crosstubes	Memo	0.00							
Crosstubes	1-Install Ground wire Insert, then insert screw and washer 2-Install Abrasion strips as per Dwg D350-748-141 & QSI 035. 3-Install supports Using Dt8876 as per Dwg D350-748-141, Torque to 60-80 IN-LBS								

NCR: Yes / No

WORK ORDER NON-CONFORMANCE / UPDATE

DQA: _____ Date: _____

QA Closed: _____ Date: _____

Work Order: _____ Part No. _____ NCR No. _____				DISPOSITION Rework <input type="checkbox"/> Scrap <input type="checkbox"/> Use-as-is <input type="checkbox"/> Work Order Update <input type="checkbox"/>		AGAINST DEPARTMENT/PROCESS <div style="display: flex; justify-content: space-between;"> <div> Skid-tube <input type="checkbox"/> Machining <input type="checkbox"/> Thermoforming <input type="checkbox"/> Large Fab <input type="checkbox"/> </div> <div> Crosstube <input type="checkbox"/> Small Fab <input type="checkbox"/> Finishing <input type="checkbox"/> Composite <input type="checkbox"/> </div> <div> Water Jet <input type="checkbox"/> Prod. Eng. Coord. <input type="checkbox"/> Rec/Store/Packaging <input type="checkbox"/> Supplier <input type="checkbox"/> </div> <div> Engineering <input type="checkbox"/> Quality <input type="checkbox"/> Other <input type="checkbox"/> </div> </div>					
Root Cause	Date	Step	Qty	Description of work order update or Non-conformance	Initial Chief Eng	Action Description	Sign & Date	Verification	QC Inspector		
Doc/Data <input type="checkbox"/>											
Equip/Tooling <input type="checkbox"/>											
Operator <input type="checkbox"/>											
Material <input type="checkbox"/>											
Setup <input type="checkbox"/>											
Other <input type="checkbox"/>											
Process <input type="checkbox"/>											
Supplier <input type="checkbox"/>											
Training <input type="checkbox"/>											
Unapproved <input type="checkbox"/>											
FAULT CATEGORY											
Landing Gear <input type="checkbox"/> Bending <input type="checkbox"/> Centre Not Concentric to O/S <input type="checkbox"/> Cracks <input type="checkbox"/> Crushed/Crimped <input type="checkbox"/> Cuffs <input type="checkbox"/> Heat Treat <input type="checkbox"/> Inspection Strip in Tube <input type="checkbox"/> Ripples in Bend <input type="checkbox"/> Torque Waves in Extrusion <input type="checkbox"/> Turning Sequence <input type="checkbox"/> Wave/Twist in Tube			General <input type="checkbox"/> Bend <input type="checkbox"/> BOM/Route <input type="checkbox"/> Broken/Damaged <input type="checkbox"/> Burrs <input type="checkbox"/> Contamination <input type="checkbox"/> Countersink <input type="checkbox"/> Cut Too Short <input type="checkbox"/> Drill Holes <input type="checkbox"/> Drawing <input type="checkbox"/> Finish <input type="checkbox"/> Folio			<input type="checkbox"/> Grain <input type="checkbox"/> Hardware <input type="checkbox"/> Inspection Incomplete <input type="checkbox"/> Instructions Incomplete/Unclear <input type="checkbox"/> Maintenance <input type="checkbox"/> Mislabeled <input type="checkbox"/> Misread <input type="checkbox"/> Offset <input type="checkbox"/> Out of Calibration <input type="checkbox"/> Out of Sequence <input type="checkbox"/> Outside Dimensions			<input type="checkbox"/> Ovalized <input type="checkbox"/> Over/Under tolerance <input type="checkbox"/> Part Incorrect <input type="checkbox"/> Part Lost/Missing <input type="checkbox"/> Part Moved <input type="checkbox"/> Positioned Wrong <input type="checkbox"/> Power Loss/Surge <input type="checkbox"/> Pressure/Forced <input type="checkbox"/> Temperature/Cure <input type="checkbox"/> Weld <input type="checkbox"/> Wrong Stock Pulled <input type="checkbox"/> Other		

Quality Control

NCR: Yes / No

WORK ORDER NON-CONFORMANCE / UPDATE

DQA: _____ Date: _____

QA Closed: _____ Date: _____

Work Order: _____ Part No. _____ NCR No. _____				DISPOSITION Rework <input type="checkbox"/> Scrap <input type="checkbox"/> Use-as-is <input type="checkbox"/> Work Order Update <input type="checkbox"/>		AGAINST DEPARTMENT/PROCESS <div style="display: flex; justify-content: space-between;"> <div> Skid-tube <input type="checkbox"/> Machining <input type="checkbox"/> Thermoforming <input type="checkbox"/> Large Fab <input type="checkbox"/> </div> <div> Crosstube <input type="checkbox"/> Small Fab <input type="checkbox"/> Finishing <input type="checkbox"/> Composite <input type="checkbox"/> </div> <div> Water Jet <input type="checkbox"/> Prod. Eng. Coord. <input type="checkbox"/> Rec/Store/Packaging <input type="checkbox"/> Supplier <input type="checkbox"/> </div> <div> Engineering <input type="checkbox"/> Quality <input type="checkbox"/> Other <input type="checkbox"/> </div> </div>						
Root Cause	Date	Step	Qty	Description of work order update or Non-conformance	Initial Chief Eng	Action Description	Sign & Date	Verification	QC Inspector			
Doc/Data <input type="checkbox"/>												
Equip/Tooling <input type="checkbox"/>												
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Setup <input type="checkbox"/>												
Other <input type="checkbox"/>												
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Supplier <input type="checkbox"/>												
Training <input type="checkbox"/>												
Unapproved <input type="checkbox"/>												
FAULT CATEGORY												
Landing Gear <input type="checkbox"/> Bending <input type="checkbox"/> Centre Not Concentric to O/S <input type="checkbox"/> Cracks <input type="checkbox"/> Crushed/Crimped. <input type="checkbox"/> Cuffs <input type="checkbox"/> Heat Treat <input type="checkbox"/> Inspection Strip in Tube <input type="checkbox"/> Ripples in Bend <input type="checkbox"/> Torque Waves in Extrusion <input type="checkbox"/> Turning Sequence <input type="checkbox"/> Wave/Twist in Tube			General <input type="checkbox"/> Bend <input type="checkbox"/> BOM/Route <input type="checkbox"/> Broken/Damaged <input type="checkbox"/> Burrs <input type="checkbox"/> Contamination <input type="checkbox"/> Countersink <input type="checkbox"/> Cut Too Short <input type="checkbox"/> Drill Holes <input type="checkbox"/> Drawing <input type="checkbox"/> Finish <input type="checkbox"/> Folio			<input type="checkbox"/> Grain <input type="checkbox"/> Hardware <input type="checkbox"/> Inspection Incomplete <input type="checkbox"/> Instructions Incomplete/Unclear <input type="checkbox"/> Maintenance <input type="checkbox"/> Mislabeled <input type="checkbox"/> Misread <input type="checkbox"/> Offset <input type="checkbox"/> Out of Calibration <input type="checkbox"/> Out of Sequence <input type="checkbox"/> Outside Dimensions			<input type="checkbox"/> Ovalized <input type="checkbox"/> Over/Under tolerance <input type="checkbox"/> Part Incorrect <input type="checkbox"/> Part Lost/Missing <input type="checkbox"/> Part Moved <input type="checkbox"/> Positioned Wrong <input type="checkbox"/> Power Loss/Surge		<input type="checkbox"/> Pressure/Forced <input type="checkbox"/> Temperature/Cure <input type="checkbox"/> Weld <input type="checkbox"/> Wrong Stock Pulled <input type="checkbox"/> Other	

Work Order ID 87334

87334

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July-13-12 1:10:28 PM

Item ID: D350-748-101 Accept *N900040100* Setup Start *NS1*
Revision ID: U/R Stop *NS2*
Item Name: Crosstube Installation, High Fwd
Start Date: 7/10/12 Start Qty: 1.00 *1* Cust Item ID:
Required Date: 9/28/12 Req'd Qty: 1.00 *1* Customer:
Reference:

Approvals: Process Plan: _____ Date: _____ Tooling: _____ Date: _____ Run Start *NR1*
QC: _____ Date: _____ SPC (Y/N): _____ Date: _____ Stop *NR2*

Sequence ID/ Work Center ID	Operation Description	Set Up/ Run Hours	Tool ID	Tool #	Plan Code	Accept Qty	Reject Qty	Reject Number	Insp. Stamp
240	Packaging	0.00							
240									
Packaging	Memo	0.00							
Packaging	Identify and pack for shipping as per PPP D350-748-101								
	Location: _____								
	PPP Rev: _____								
250	QC21- Final Inspection - Work Order Release	0.00							
250									
QC	Memo	0.00							
Quality Control									

RB-04-4

NCR: Yes / No

WORK ORDER NON-CONFORMANCE / UPDATE

DQA: _____ Date: _____

QA Closed: _____ Date: _____

Work Order: _____ Part No. _____ NCR No. _____				DISPOSITION Rework <input type="checkbox"/> Scrap <input type="checkbox"/> Use-as-is <input type="checkbox"/> Work Order Update <input type="checkbox"/>		AGAINST DEPARTMENT/PROCESS <div style="display: flex; justify-content: space-between;"> <div> Skid-tube <input type="checkbox"/> Machining <input type="checkbox"/> Thermoforming <input type="checkbox"/> Large Fab <input type="checkbox"/> </div> <div> Crosstube <input type="checkbox"/> Small Fab <input type="checkbox"/> Finishing <input type="checkbox"/> Composite <input type="checkbox"/> </div> <div> Water Jet <input type="checkbox"/> Prod. Eng. Coord. <input type="checkbox"/> Rec/Store/Packaging <input type="checkbox"/> Supplier <input type="checkbox"/> </div> <div> Engineering <input type="checkbox"/> Quality <input type="checkbox"/> Other <input type="checkbox"/> </div> </div>						
Root Cause	Date	Step	Qty	Description of work order update or Non-conformance	Initial Chief Eng	Action Description	Sign & Date	Verification	QC Inspector			
Doc/Data <input type="checkbox"/>												
Equip/Tooling <input type="checkbox"/>												
Operator <input type="checkbox"/>												
Material <input type="checkbox"/>												
Setup <input type="checkbox"/>												
Other <input type="checkbox"/>												
Process <input type="checkbox"/>												
Supplier <input type="checkbox"/>												
Training <input type="checkbox"/>												
Unapproved <input type="checkbox"/>												
FAULT CATEGORY												
Landing Gear <input type="checkbox"/> Bending <input type="checkbox"/> Centre Not Concentric to O/S <input type="checkbox"/> Cracks <input type="checkbox"/> Crushed/Crimped. <input type="checkbox"/> Cuffs <input type="checkbox"/> Heat Treat <input type="checkbox"/> Inspection Strip in Tube <input type="checkbox"/> Ripples in Bend <input type="checkbox"/> Torque Waves in Extrusion <input type="checkbox"/> Turning Sequence <input type="checkbox"/> Wave/Twist in Tube			General <input type="checkbox"/> Bend <input type="checkbox"/> BOM/Route <input type="checkbox"/> Broken/Damaged <input type="checkbox"/> Burrs <input type="checkbox"/> Contamination <input type="checkbox"/> Countersink <input type="checkbox"/> Cut Too Short <input type="checkbox"/> Drill Holes <input type="checkbox"/> Drawing <input type="checkbox"/> Finish <input type="checkbox"/> Folio			<input type="checkbox"/> Grain <input type="checkbox"/> Hardware <input type="checkbox"/> Inspection Incomplete <input type="checkbox"/> Instructions Incomplete/Unclear <input type="checkbox"/> Maintenance <input type="checkbox"/> Mislabeled <input type="checkbox"/> Misread <input type="checkbox"/> Offset <input type="checkbox"/> Out of Calibration <input type="checkbox"/> Out of Sequence <input type="checkbox"/> Outside Dimensions			<input type="checkbox"/> Ovalized <input type="checkbox"/> Over/Under tolerance <input type="checkbox"/> Part Incorrect <input type="checkbox"/> Part Lost/Missing <input type="checkbox"/> Part Moved <input type="checkbox"/> Positioned Wrong <input type="checkbox"/> Power Loss/Surge 		<input type="checkbox"/> Pressure/Forced <input type="checkbox"/> Temperature/Cure <input type="checkbox"/> Weld <input type="checkbox"/> Wrong Stock Pulled <input type="checkbox"/> Other	

Picklist Print

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Page 1

Work Order ID: 87334

Parent Item: D350-748-101

Start Date: 7/10/12

Required Date: 9/28/12

Parent Item Name: Crosstube Installation, High Fwd

Start Qty: 1.00

Required Qty: 1.00

Comments: IPP Rev:A New Issue 06-07-05 JLM
 IPP Rev:B Update qty of MS21042L5 06-09-12 KJ VERIFY BY:DD
 IPP Rev:C Rev B 07-11-15 DD
 IPP Rev D Combined manufacturing 08.04.02 EC verified by: DD
 IPP Rev:E 08-06-24 revD as per dwg DD verified by:EC IPP Rev:F 10.08.04 added QSI010
 4.3 DD verified:EC
 IPP REV:G ADD UNDER BEND COMMENT 12-05-28 JLM

Component Item ID/ Item Name	Replacement Item ID	Mfg/ Purch	Bin Item	Primary Location	Last Location	Route Seq ID	Unit of Measure	Qty on Hand	Qty per Kit	Total Qty	Qty Issued	Date Issued	Status
ALS4-1032-225 Insert		Purchased	No			200	Each	2,462.0000	1	1			

Location	Loc Qty	Loc Code
FP-B	2019	
122290	2019	
ST281	420	
108696	146	
110768	62	
118386	55	
118966	68	
121269	89	
ST282	23	
120410	10	
120451	13	

AN4-41A
Bolt

Purchased No

220 Each 411.0000

8 8

Location	Loc Qty	Loc Code
360	181	
121185	181	
ST360	230	
115108	3	
115705	1	
118838	8	
119328	68	
120423	150	

NCR: Yes / No

WORK ORDER NON-CONFORMANCE / UPDATE

DQA: _____ Date: _____

QA Closed: _____ Date: _____

Work Order: _____ Part No. _____ NCR No. _____	DISPOSITION Rework <input type="checkbox"/> Scrap <input type="checkbox"/> Use-as-is <input type="checkbox"/> Work Order Update <input type="checkbox"/>	AGAINST DEPARTMENT/PROCESS <table style="width: 100%;"> <tr> <td>Skid-tube <input type="checkbox"/></td> <td>Crosstube <input type="checkbox"/></td> <td>Water Jet <input type="checkbox"/></td> <td>Engineering <input type="checkbox"/></td> </tr> <tr> <td>Machining <input type="checkbox"/></td> <td>Small Fab <input type="checkbox"/></td> <td>Prod. Eng. Coord. <input type="checkbox"/></td> <td>Quality <input type="checkbox"/></td> </tr> <tr> <td>Thermoforming <input type="checkbox"/></td> <td>Finishing <input type="checkbox"/></td> <td>Rec/Store/Packaging <input type="checkbox"/></td> <td>Other <input type="checkbox"/></td> </tr> <tr> <td>Large Fab <input type="checkbox"/></td> <td>Composite <input type="checkbox"/></td> <td>Supplier <input type="checkbox"/></td> <td></td> </tr> </table>	Skid-tube <input type="checkbox"/>	Crosstube <input type="checkbox"/>	Water Jet <input type="checkbox"/>	Engineering <input type="checkbox"/>	Machining <input type="checkbox"/>	Small Fab <input type="checkbox"/>	Prod. Eng. Coord. <input type="checkbox"/>	Quality <input type="checkbox"/>	Thermoforming <input type="checkbox"/>	Finishing <input type="checkbox"/>	Rec/Store/Packaging <input type="checkbox"/>	Other <input type="checkbox"/>	Large Fab <input type="checkbox"/>	Composite <input type="checkbox"/>	Supplier <input type="checkbox"/>	
Skid-tube <input type="checkbox"/>	Crosstube <input type="checkbox"/>	Water Jet <input type="checkbox"/>	Engineering <input type="checkbox"/>															
Machining <input type="checkbox"/>	Small Fab <input type="checkbox"/>	Prod. Eng. Coord. <input type="checkbox"/>	Quality <input type="checkbox"/>															
Thermoforming <input type="checkbox"/>	Finishing <input type="checkbox"/>	Rec/Store/Packaging <input type="checkbox"/>	Other <input type="checkbox"/>															
Large Fab <input type="checkbox"/>	Composite <input type="checkbox"/>	Supplier <input type="checkbox"/>																

Root Cause	Date	Step	Qty	Description of work order update or Non-conformance	Initial Chief Eng	Action Description	Sign & Date	Verification	QC Inspector
Doc/Data <input type="checkbox"/>									
Equip/Tooling <input type="checkbox"/>									
Operator <input type="checkbox"/>									
Material <input type="checkbox"/>									
Setup <input type="checkbox"/>									
Other <input type="checkbox"/>									
Process <input type="checkbox"/>									
Supplier <input type="checkbox"/>									
Training <input type="checkbox"/>									
Unapproved <input type="checkbox"/>									

FAULT CATEGORY

Landing Gear <input type="checkbox"/> Bending <input type="checkbox"/> Centre Not Concentric to O/S <input type="checkbox"/> Cracks <input type="checkbox"/> Crushed/Crimped. <input type="checkbox"/> Cuffs <input type="checkbox"/> Heat Treat <input type="checkbox"/> Inspection Strip in Tube <input type="checkbox"/> Ripples in Bend <input type="checkbox"/> Torque Waves in Extrusion <input type="checkbox"/> Turning Sequence <input type="checkbox"/> Wave/Twist in Tube	General <input type="checkbox"/> Bend <input type="checkbox"/> BOM/Route <input type="checkbox"/> Broken/Damaged <input type="checkbox"/> Burrs <input type="checkbox"/> Contamination <input type="checkbox"/> Countersink <input type="checkbox"/> Cut Too Short <input type="checkbox"/> Drill Holes <input type="checkbox"/> Drawing <input type="checkbox"/> Finish <input type="checkbox"/> Folio	<input type="checkbox"/> Grain <input type="checkbox"/> Hardware <input type="checkbox"/> Inspection Incomplete <input type="checkbox"/> Instructions Incomplete/Unclear <input type="checkbox"/> Maintenance <input type="checkbox"/> Mislabeled <input type="checkbox"/> Misread <input type="checkbox"/> Offset <input type="checkbox"/> Out of Calibration <input type="checkbox"/> Out of Sequence <input type="checkbox"/> Outside Dimensions
		<input type="checkbox"/> Ovalized <input type="checkbox"/> Over/Under tolerance <input type="checkbox"/> Part Incorrect <input type="checkbox"/> Part Lost/Missing <input type="checkbox"/> Part Moved <input type="checkbox"/> Positioned Wrong <input type="checkbox"/> Power Loss/Surge
		<input type="checkbox"/> Pressure/Forced <input type="checkbox"/> Temperature/Cure <input type="checkbox"/> Weld <input type="checkbox"/> Wrong Stock Pulled <input type="checkbox"/> Other

Picklist Print

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Page 2

Work Order ID: 87334

Parent Item: D350-748-101

Start Date: 7/10/12

Required Date: 9/28/12

Parent Item Name: Crosstube Installation, High Fwd

Start Qty: 1.00

Required Qty: 1.00

AN4-6A	Purchased	No	220	Each	1,363.0000	16	16
Bolt							

<u>Location</u>	<u>Loc Qty</u>	<u>Loc Code</u>
ST356	1363	
119017	363	
121243	500	
122151	500	

AN5-32A	Purchased	No	220	Each	277.0000	4	4
Bolt							

<u>Location</u>	<u>Loc Qty</u>	<u>Loc Code</u>
ST339	177	
119862	2	
120423	75	
122151	100	
ST340	100	
121541	100	

AN960JD10	NAS1149D0363J	Purchased	No	200	Each	0.0000	1	1
Washer								

AN960JD416	NAS1149D0463J	Purchased	No	220	Each	29.0000	32	32
Washer								

<u>Location</u>	<u>Loc Qty</u>	<u>Loc Code</u>
ST351	29	
116289	8	
119097	21	

AN960JD516	NAS1149D0563J	Purchased	No	220	Each	12.0000	8	8
Washer								

<u>Location</u>	<u>Loc Qty</u>	<u>Loc Code</u>
ST338	12	
2612	12	

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Page 2

NCR: Yes / No

WORK ORDER NON-CONFORMANCE / UPDATE

DQA: _____ Date: _____

QA Closed: _____ Date: _____

Work Order: _____ Part No. _____ NCR No. _____				DISPOSITION Rework <input type="checkbox"/> Scrap <input type="checkbox"/> Use-as-is <input type="checkbox"/> Work Order Update <input type="checkbox"/>		AGAINST DEPARTMENT/PROCESS <div style="display: flex; justify-content: space-between;"> <div> Skid-tube <input type="checkbox"/> Machining <input type="checkbox"/> Thermoforming <input type="checkbox"/> Large Fab <input type="checkbox"/> </div> <div> Crosstube <input type="checkbox"/> Small Fab <input type="checkbox"/> Finishing <input type="checkbox"/> Composite <input type="checkbox"/> </div> <div> Water Jet <input type="checkbox"/> Prod. Eng. Coord. <input type="checkbox"/> Rec/Store/Packaging <input type="checkbox"/> Supplier <input type="checkbox"/> </div> <div> Engineering <input type="checkbox"/> Quality <input type="checkbox"/> Other <input type="checkbox"/> </div> </div>					
Root Cause	Date	Step	Qty	Description of work order update or Non-conformance	Initial Chief Eng	Action Description	Sign & Date	Verification	QC Inspector		
Doc/Data <input type="checkbox"/>											
Equip/Tooling <input type="checkbox"/>											
Operator <input type="checkbox"/>											
Material <input type="checkbox"/>											
Setup <input type="checkbox"/>											
Other <input type="checkbox"/>											
Process <input type="checkbox"/>											
Supplier <input type="checkbox"/>											
Training <input type="checkbox"/>											
Unapproved <input type="checkbox"/>											
FAULT CATEGORY											
Landing Gear <input type="checkbox"/> Bending <input type="checkbox"/> Centre Not Concentric to O/S <input type="checkbox"/> Cracks <input type="checkbox"/> Crushed/Crimped. <input type="checkbox"/> Cuffs <input type="checkbox"/> Heat Treat <input type="checkbox"/> Inspection Strip in Tube <input type="checkbox"/> Ripples in Bend <input type="checkbox"/> Torque Waves in Extrusion <input type="checkbox"/> Turning Sequence <input type="checkbox"/> Wave/Twist in Tube			General <input type="checkbox"/> Bend <input type="checkbox"/> BOM/Route <input type="checkbox"/> Broken/Damaged <input type="checkbox"/> Burrs <input type="checkbox"/> Contamination <input type="checkbox"/> Countersink <input type="checkbox"/> Cut Too Short <input type="checkbox"/> Drill Holes <input type="checkbox"/> Drawing <input type="checkbox"/> Finish <input type="checkbox"/> Folio			<input type="checkbox"/> Grain <input type="checkbox"/> Hardware <input type="checkbox"/> Inspection Incomplete <input type="checkbox"/> Instructions Incomplete/Unclear <input type="checkbox"/> Maintenance <input type="checkbox"/> Mislabeled <input type="checkbox"/> Misread <input type="checkbox"/> Offset <input type="checkbox"/> Out of Calibration <input type="checkbox"/> Out of Sequence <input type="checkbox"/> Outside Dimensions			<input type="checkbox"/> Ovalized <input type="checkbox"/> Over/Under tolerance <input type="checkbox"/> Part Incorrect <input type="checkbox"/> Part Lost/Missing <input type="checkbox"/> Part Moved <input type="checkbox"/> Positioned Wrong <input type="checkbox"/> Power Loss/Surge <input type="checkbox"/> Pressure/Forced <input type="checkbox"/> Temperature/Cure <input type="checkbox"/> Weld <input type="checkbox"/> Wrong Stock Pulled <input type="checkbox"/> Other		

Picklist Print

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Page 3

Work Order ID: 87334

Parent Item: D350-748-101

Start Date: 7/10/12

Required Date: 9/28/12

Parent Item Name: Crosstube Installation, High Fwd

Start Qty: 1.00

Required Qty: 1.00

D2856-400 Manufactured No 200 f 143.0425 1.181 1.2431579
Abrasion Strip

<u>Location</u>	<u>Loc Qty</u>	<u>Loc Code</u>
ST403	133.598	
81875	133.598	
ST409	9.4445	
63735	0.6696	
68076	0.3149	
71164	8.46	

D3500-1 Manufactured No 220 Each 51.0000 4 4
Saddle

<u>Location</u>	<u>Loc Qty</u>	<u>Loc Code</u>
ST423	40	
85421	40	
ST425	11	
76940	11	

D3501-1 Manufactured No 220 Each 232.0000 16 16
Bushing

<u>Location</u>	<u>Loc Qty</u>	<u>Loc Code</u>
ST051	232	
67757	4	
73391	6	
74866	206	
85414	16	

D3502-1 Manufactured No 200 Each 47.0000 2 2
Support

<u>Location</u>	<u>Loc Qty</u>	<u>Loc Code</u>
LG050	37	
77041	37	
ST051	10	
73419	9	
74873	1	

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Page 3

NCR: Yes / No

WORK ORDER NON-CONFORMANCE / UPDATE

DQA: _____ Date: _____

QA Closed: _____ Date: _____

Work Order: _____ Part No. _____ NCR No. _____				DISPOSITION Rework <input type="checkbox"/> Scrap <input type="checkbox"/> Use-as-is <input type="checkbox"/> Work Order Update <input type="checkbox"/>		AGAINST DEPARTMENT/PROCESS <div style="display: flex; justify-content: space-between;"> <div> Skid-tube <input type="checkbox"/> Machining <input type="checkbox"/> Thermoforming <input type="checkbox"/> Large Fab <input type="checkbox"/> </div> <div> Crosstube <input type="checkbox"/> Small Fab <input type="checkbox"/> Finishing <input type="checkbox"/> Composite <input type="checkbox"/> </div> <div> Water Jet <input type="checkbox"/> Prod. Eng. Coord. <input type="checkbox"/> Rec/Store/Packaging <input type="checkbox"/> Supplier <input type="checkbox"/> </div> <div> Engineering <input type="checkbox"/> Quality <input type="checkbox"/> Other <input type="checkbox"/> </div> </div>						
Root Cause	Date	Step	Qty	Description of work order update or Non-conformance	Initial Chief Eng	Action Description	Sign & Date	Verification	QC Inspector			
Doc/Data <input type="checkbox"/>												
Equip/Tooling <input type="checkbox"/>												
Operator <input type="checkbox"/>												
Material <input type="checkbox"/>												
Setup <input type="checkbox"/>												
Other <input type="checkbox"/>												
Process <input type="checkbox"/>												
Supplier <input type="checkbox"/>												
Training <input type="checkbox"/>												
Unapproved <input type="checkbox"/>												
FAULT CATEGORY												
Landing Gear <input type="checkbox"/> Bending <input type="checkbox"/> Centre Not Concentric to O/S <input type="checkbox"/> Cracks <input type="checkbox"/> Crushed/Crimped. <input type="checkbox"/> Cuffs <input type="checkbox"/> Heat Treat <input type="checkbox"/> Inspection Strip in Tube <input type="checkbox"/> Ripples in Bend <input type="checkbox"/> Torque Waves in Extrusion <input type="checkbox"/> Turning Sequence <input type="checkbox"/> Wave/Twist in Tube			General <input type="checkbox"/> Bend <input type="checkbox"/> BOM/Route <input type="checkbox"/> Broken/Damaged <input type="checkbox"/> Burrs <input type="checkbox"/> Contamination <input type="checkbox"/> Countersink <input type="checkbox"/> Cut Too Short <input type="checkbox"/> Drill Holes <input type="checkbox"/> Drawing <input type="checkbox"/> Finish <input type="checkbox"/> Folio			<input type="checkbox"/> Grain <input type="checkbox"/> Hardware <input type="checkbox"/> Inspection Incomplete <input type="checkbox"/> Instructions Incomplete/Unclear <input type="checkbox"/> Maintenance <input type="checkbox"/> Mislabeled <input type="checkbox"/> Misread <input type="checkbox"/> Offset <input type="checkbox"/> Out of Calibration <input type="checkbox"/> Out of Sequence <input type="checkbox"/> Outside Dimensions			<input type="checkbox"/> Ovalized <input type="checkbox"/> Over/Under tolerance <input type="checkbox"/> Part Incorrect <input type="checkbox"/> Part Lost/Missing <input type="checkbox"/> Part Moved <input type="checkbox"/> Positioned Wrong <input type="checkbox"/> Power Loss/Surge		<input type="checkbox"/> Pressure/Forced <input type="checkbox"/> Temperature/Cure <input type="checkbox"/> Weld <input type="checkbox"/> Wrong Stock Pulled <input type="checkbox"/> Other	

Picklist Print

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Page 4

Work Order ID: 87334

Parent Item: D350-748-101

Start Date: 7/10/12

Required Date: 9/28/12

Parent Item Name: Crosstube Installation, High Fwd

Start Qty: 1.00

Required Qty: 1.00

D350-748-141TRN
Crosstube Turning Detail

Manufactured No

110 Each 2.0000 1

840 13-01-30

Location

Loc Qty

Loc Code

LG

2

83277

1

83278

1

384655

10

MS21042L4

Purchased No

220 Each 2,205.0000 24

24

Nut

Location

Loc Qty

Loc Code

ST300

2205

119075

116

121011

193

121444

1896

MS21042L5

Purchased No

220 Each 1,066.0000 4

4

Nut

Location

Loc Qty

Loc Code

300

500

121652

500

ST300

566

108827

4

116105

5

116548

43

119109

502

17651

4

2937

8

MS21920-20

Purchased No

200 Each 127.0000 2

2

Clamp (per MIL-DTL-8783C)

Location

Loc Qty

Loc Code

LG050

127

116799

8

120676

8

121067

2

121274

34

122254

75

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Shop Packet Print

Page 4

NCR: Yes / No

WORK ORDER NON-CONFORMANCE / UPDATE

DQA: _____ Date: _____

QA Closed: _____ Date: _____

Work Order: _____ Part No. _____ NCR No. _____				DISPOSITION Rework <input type="checkbox"/> Scrap <input type="checkbox"/> Use-as-is <input type="checkbox"/> Work Order Update <input type="checkbox"/>		AGAINST DEPARTMENT/PROCESS <div style="display: flex; justify-content: space-between;"> <div> Skid-tube <input type="checkbox"/> Machining <input type="checkbox"/> Thermoforming <input type="checkbox"/> Large Fab <input type="checkbox"/> </div> <div> Crosstube <input type="checkbox"/> Small Fab <input type="checkbox"/> Finishing <input type="checkbox"/> Composite <input type="checkbox"/> </div> <div> Water Jet <input type="checkbox"/> Prod. Eng. Coord. <input type="checkbox"/> Rec/Store/Packaging <input type="checkbox"/> Supplier <input type="checkbox"/> </div> <div> Engineering <input type="checkbox"/> Quality <input type="checkbox"/> Other <input type="checkbox"/> </div> </div>						
Root Cause	Date	Step	Qty	Description of work order update or Non-conformance	Initial Chief Eng	Action Description	Sign & Date	Verification	QC Inspector			
Doc/Data <input type="checkbox"/>												
Equip/Tooling <input type="checkbox"/>												
Operator <input type="checkbox"/>												
Material <input type="checkbox"/>												
Setup <input type="checkbox"/>												
Other <input type="checkbox"/>												
Process <input type="checkbox"/>												
Supplier <input type="checkbox"/>												
Training <input type="checkbox"/>												
Unapproved <input type="checkbox"/>												
FAULT CATEGORY												
Landing Gear <input type="checkbox"/> Bending <input type="checkbox"/> Centre Not Concentric to O/S <input type="checkbox"/> Cracks <input type="checkbox"/> Crushed/Crimped <input type="checkbox"/> Cuffs <input type="checkbox"/> Heat Treat <input type="checkbox"/> Inspection Strip in Tube <input type="checkbox"/> Ripples in Bend <input type="checkbox"/> Torque Waves in Extrusion <input type="checkbox"/> Turning Sequence <input type="checkbox"/> Wave/Twist in Tube			General <input type="checkbox"/> Bend <input type="checkbox"/> BOM/Route <input type="checkbox"/> Broken/Damaged <input type="checkbox"/> Burrs <input type="checkbox"/> Contamination <input type="checkbox"/> Countersink <input type="checkbox"/> Cut Too Short <input type="checkbox"/> Drill Holes <input type="checkbox"/> Drawing <input type="checkbox"/> Finish <input type="checkbox"/> Folio			<input type="checkbox"/> Grain <input type="checkbox"/> Hardware <input type="checkbox"/> Inspection Incomplete <input type="checkbox"/> Instructions Incomplete/Unclear <input type="checkbox"/> Maintenance <input type="checkbox"/> Mislabeled <input type="checkbox"/> Misread <input type="checkbox"/> Offset <input type="checkbox"/> Out of Calibration <input type="checkbox"/> Out of Sequence <input type="checkbox"/> Outside Dimensions			<input type="checkbox"/> Ovalized <input type="checkbox"/> Over/Under tolerance <input type="checkbox"/> Part Incorrect <input type="checkbox"/> Part Lost/Missing <input type="checkbox"/> Part Moved <input type="checkbox"/> Positioned Wrong <input type="checkbox"/> Power Loss/Surge _____ _____ _____		<input type="checkbox"/> Pressure/Forced <input type="checkbox"/> Temperature/Cure <input type="checkbox"/> Weld <input type="checkbox"/> Wrong Stock Pulled <input type="checkbox"/> Other _____ _____ _____	

Picklist Print

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Page 5

Work Order ID: 87334

Parent Item: D350-748-101

Start Date: 7/10/12

Required Date: 9/28/12

Parent Item Name: Crosstube Installation, High Fwd

Start Qty: 1.00

Required Qty: 1.00

MS27039-1-10

Purchased

No

200

Each

141.0000

1

1

Screw

Location

Loc Qty

Loc Code

GA

100

120449

100

ST291

5

120120

5

ST308

36

122027

36

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Page 5

NCR: Yes / No

WORK ORDER NON-CONFORMANCE / UPDATE

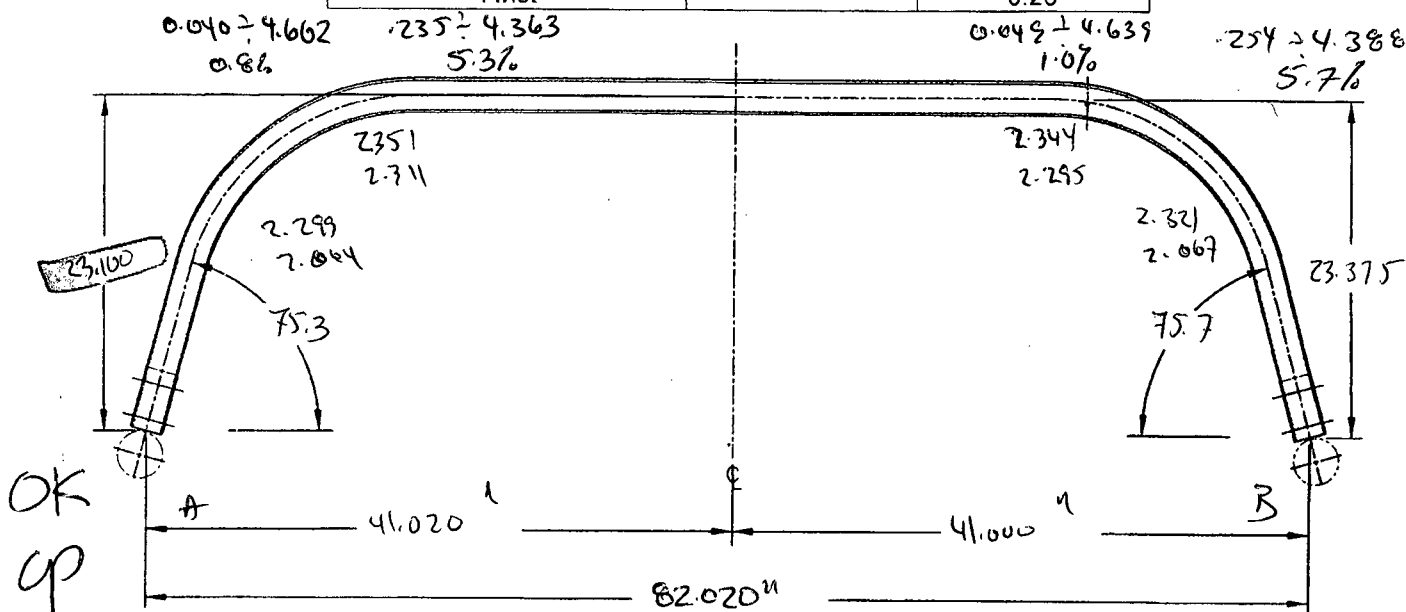
DQA: _____ Date: _____

QA Closed: _____ Date: _____

Work Order: _____ Part No. _____ NCR No. _____				DISPOSITION Rework <input type="checkbox"/> Scrap <input type="checkbox"/> Use-as-is <input type="checkbox"/> Work Order Update <input type="checkbox"/>		AGAINST DEPARTMENT/PROCESS <div style="display: flex; justify-content: space-between;"> <div> Skid-tube <input type="checkbox"/> Machining <input type="checkbox"/> Thermoforming <input type="checkbox"/> Large Fab <input type="checkbox"/> </div> <div> Crosstube <input type="checkbox"/> Small Fab <input type="checkbox"/> Finishing <input type="checkbox"/> Composite <input type="checkbox"/> </div> <div> Water Jet <input type="checkbox"/> Prod. Eng. Coord. <input type="checkbox"/> Rec/Store/Packaging <input type="checkbox"/> Supplier <input type="checkbox"/> </div> <div> Engineering <input type="checkbox"/> Quality <input type="checkbox"/> Other <input type="checkbox"/> </div> </div>					
Root Cause	Date	Step	Qty	Description of work order update or Non-conformance	Initial Chief Eng	Action Description	Sign & Date	Verification	QC Inspector		
Doc/Data <input type="checkbox"/>											
Equip/Tooling <input type="checkbox"/>											
Operator <input type="checkbox"/>											
Material <input type="checkbox"/>											
Setup <input type="checkbox"/>											
Other <input type="checkbox"/>											
Process <input type="checkbox"/>											
Supplier <input type="checkbox"/>											
Training <input type="checkbox"/>											
Unapproved <input type="checkbox"/>											
FAULT CATEGORY											
Landing Gear <input type="checkbox"/> Bending <input type="checkbox"/> Centre Not Concentric to O/S <input type="checkbox"/> Cracks <input type="checkbox"/> Crushed/Crimped. <input type="checkbox"/> Cuffs <input type="checkbox"/> Heat Treat <input type="checkbox"/> Inspection Strip in Tube <input type="checkbox"/> Ripples in Bend <input type="checkbox"/> Torque Waves in Extrusion <input type="checkbox"/> Turning Sequence <input type="checkbox"/> Wave/Twist in Tube			General <input type="checkbox"/> Bend <input type="checkbox"/> BOM/Route <input type="checkbox"/> Broken/Damaged <input type="checkbox"/> Burrs <input type="checkbox"/> Contamination <input type="checkbox"/> Countersink <input type="checkbox"/> Cut Too Short <input type="checkbox"/> Drill Holes <input type="checkbox"/> Drawing <input type="checkbox"/> Finish <input type="checkbox"/> Folio			<input type="checkbox"/> Grain <input type="checkbox"/> Hardware <input type="checkbox"/> Inspection Incomplete <input type="checkbox"/> Instructions Incomplete/Unclear <input type="checkbox"/> Maintenance <input type="checkbox"/> Mislabeled <input type="checkbox"/> Misread <input type="checkbox"/> Offset <input type="checkbox"/> Out of Calibration <input type="checkbox"/> Out of Sequence <input type="checkbox"/> Outside Dimensions			<input type="checkbox"/> Ovalized <input type="checkbox"/> Over/Under tolerance <input type="checkbox"/> Part Incorrect <input type="checkbox"/> Part Lost/Missing <input type="checkbox"/> Part Moved <input type="checkbox"/> Positioned Wrong <input type="checkbox"/> Power Loss/Surge <input type="checkbox"/> Pressure/Forced <input type="checkbox"/> Temperature/Cure <input type="checkbox"/> Weld <input type="checkbox"/> Wrong Stock Pulled <input type="checkbox"/> Other		

DART AEROSPACE LTD		Work Order:	87334
Description: Crosstube High Fwd (AS350/355)		Part Number:	D350-748-101
Inspection Dwg: D350-748-141 Rev: F		Page 1 of 1	

Required Dimension	Min	Max
Height	23.12	23.38
1/2 Span	40.77	41.03
Angle	75	77
Total Span	81.55	82.05
Bending Passes	7	--
Crushing	--	6%
Twist	--	0.25



	Side A	Side B
Bending Passes		
Crushing		
Comments		
Side A = crushing at top = 0.8% at Bottom = 5.3%		
Side B = crushing at Top = 1.0% at Bottom = 5.7%		
twist = 0.055"		

QC15 Inspection	DAS
Date	16 13/2/06

Rev	Date	Change	Revised by	Approved
A	07.02.06	New Issue	KJ/JM	
B	10.08.23	Dwg Rev updated	KJ	
C	11.11.07	Dwg Rev updated	KJ	
D	12.04.16	Added bending, crushing & twist dimensions	KJ	CP

Item	Qty -141	Part Number	Description
1	X	D350-748-141	CROSSTUBE ASSEMBLY (AS 350/355 HI FWD)
2	1	D6015-125	CROSSTUBE (OR D6017-115)
3	2	D3502-1	SUPPORT
4	2	D2856-400-710	ABRASION STRIP
5	1	AELS-1032-225	INSERT
6	1	NAS1149D0363J	WASHER (OR AN960JD10)
7	2	MS21920-20	CLAMP (PER DART SPEC. M-MS21920-20)
8	1	MS27039-1-10	SCREW

GENERAL NOTES:

- 1) MATERIAL: MANUFACTURED FROM D6015-125 OR D6017-115
FINISHED LENGTH = 110.270±0.06
- 2) FINISH: MAGNETIC PARTICLE INSPECT PER DART QSI 038 4.2
CADMIUM PLATE PER AMS-QQ-P-416B, CLASS 1, TYPE II
PRIME INSIDE AND OUTSIDE PER DART QSI 005 4.2
PAINT OUTSIDE PER DART QSI 005 4.2
- 3) TOLERANCES ARE PER DART QSI 018 UNLESS OTHERWISE NOTED.
- 4) UNITS: INCHES UNLESS OTHERWISE NOTED.
- 5) BREAK SHARP EDGES: 0.005 TO 0.010 MAX.
- 6) IDENTIFICATION: DART PART NUMBER "D350-748-141" AND BATCH NUMBER ON INSIDE OF CUFF
PER DART QSI 044 6.4 (VIBRATING STYLUS)
- 7) WEIGHT: 30.45 lbs
- 8) PART IS SYMMETRIC ABOUT CENTERLINE, EXCEPT FOR Ø0.297 HOLE.
- 9) BLEND OUT ALL EDGES FROM MACHINING LONGITUDINALLY, TRANSITION SHOULD BE SMOOTH.
NOTE: ALL HOLES ARE DRILLED AFTER BENDING.
- 10) BEND PROGRESSIVELY WITH A MINIMUM OF 7 PASSES. MAXIMUM TUBE FLATTENING DUE TO
BENDING IS 6% BASED ON O.D.
- 11) HEAT TREAT TO MIN. 180 KSI PER MIL-T-6736 OR AMS 2759-1C AFTER TURNING. ACCEPTABLE TO
VERIFY TENSILE STRENGTH BY HARDNESS TEST PER ASTM E18 TO 40-45 HRC.
- 12) INSTALL D2856-400-710 ABRASION STRIPS WITH A GAP ON BOTTOM SIDE OF CROSSTUBE,
CENTERED OPPOSITE D3502-1 SUPPORT, PER QSI 035.
- 13) EXTREME CARE MUST BE TAKEN TO PROTECT THE OUTSIDE SURFACE OF THE TUBE. THE
OUTSIDE SURFACE MUST BE SMOOTH AND FREE FROM SURFACE DEFECTS SUCH AS SCRATCHES,
NICKS, OR DENTS. DEFECTS UP TO 0.005" MAY BE BLENDED OUT LONGITUDINALLY.
CIRCUMFERENTIAL GRIND MARKS ARE UNACCEPTABLE. WHEN DRILLING HOLES EXTREME CARE
MUST BE TAKEN AND CAREFUL DEBURRING PERFORMED TO ENSURE A CLEAN HOLE WITH NO
CRACKING/CHIPPING/GROOVES.
- 14) TORQUE CLAMPS 60 TO 80 IN-LB. ENSURE AT LEAST 1.5 THREADS SHOWING IN SAFETY AND THAT
NUT HAS NOT BOTTOMED-OUT AFTER TORQUING.
- 15) MAX TWIST AFTER BENDING: WITH XTUBE LAYED FLAT ON SURFACE, THE DIFFERENCE BETWEEN
CUFF HEIGHTS FROM THE SURFACE MAY BE NO LARGER THAN 0.25 (ZN C1-3).

SHOP COPY
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UNCONTROLLED COPY
SUBJECT TO IMPLEMENTATION
WITHOUT NOTICE
WORK ORDER
NO. 87334 MLS
12/07/16

UNDER REVIEW

11.07.12

RELEASED
2011-01-18

F	ADD HRC TEST OPTION (B8-1) PER PAR 09-040, ADD TWIST LIMIT (A8-1, C1-3), ADD D6015-125 OPTION (C8-1), STOCK DIM NOW MACHINED (D1-4)	CP	10.11.23
E	REVISE GENERAL NOTES; UPDATE TO CURRENT ADD STANDARDS; RELOCATED FLAG #6 PER PAR 08-046 (ZN A6-3); TOLERANCES (ZN C6-3, D1-3)	RF	09.09.30
D	MAG. PARTICLE AND CAD PLATE AS MFD.	CP	06.10.31
C	ADD CAD PLATING	CP	06.08.14
B	ADD D6017-115 & PRIME AND PAINT	CP	06.06.30
A	NEW ISSUE	CP	06.03.31
REV.	DESCRIPTION	BY	DATE
DESIGN			
DRAWN			
CHECKED			
MFG. APPR.			
APPROVED			
DE APPR.			
DATE	10.11.23		

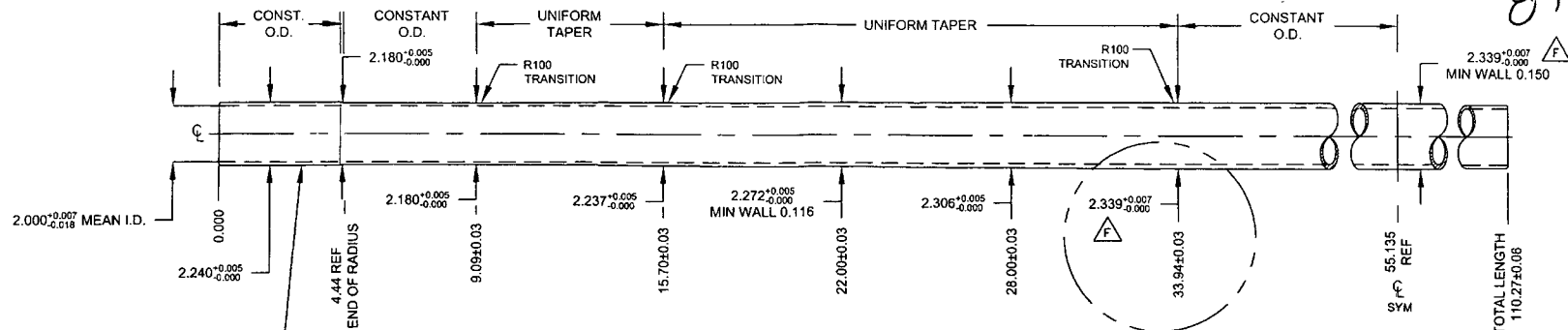
DART AEROSPACE LTD
HAWKESBURY, ONTARIO, CANADA

DRAWING NO. D350-748-141
REV. F
SHEET 1 OF 4
TITLE CROSSTUBE (AS 350/355 HI FWD)
SCALE NTS

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NOT TO BE USED FOR ANY PURPOSE OR COPIED OR COMMUNICATED TO ANY OTHER PERSON WITHOUT
WRITTEN PERMISSION FROM DART AEROSPACE LTD.

8 7 6 5 4 3 2 1

87334

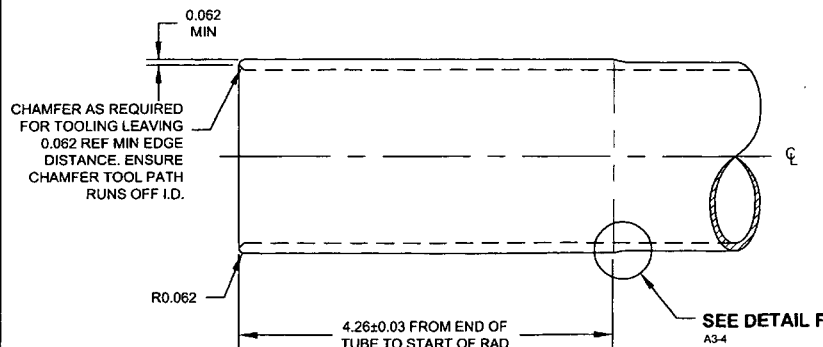


SEE DETAIL D A6-4

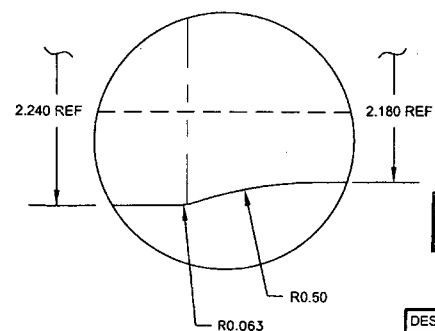
SEE DETAIL E A1-4

UNDER REVIEW
11.02.12

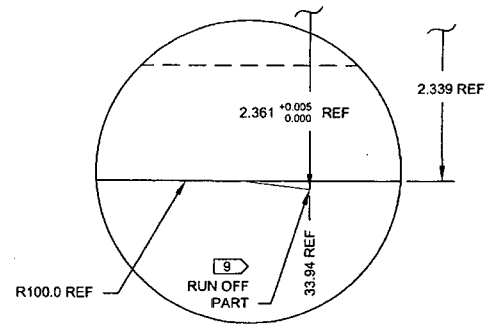
**D350-748-141TRN
TURNING DETAIL**



**DETAIL D:
CROSSTUBE CUFF** C7-4
SCALE 3X



**DETAIL F:
CUFF TRANSITION** A5-4
NOT TO SCALE



**DETAIL E:
TAPER RUN-OFF** C3-4
NOT TO SCALE

RELEASED
2011-01-18

DESIGN	97	DART AEROSPACE LTD	
DRAWN	97	HAWKESBURY, ONTARIO, CANADA	
CHECKED	13	DRAWING NO.	REV. F
MFG. APPR.	13	D350-748-141	SHEET 4 OF 4
APPROVED	13	TITLE	SCALE
DE APPR.	13	CROSSTUBE (AS 350/355 HI FWD)	NTS
DATE	10.11.23	<small>COPYRIGHT © 2006 BY DART AEROSPACE LTD THIS DOCUMENT IS PRIVATE AND CONFIDENTIAL AND IS SUPPLIED ON THE EXPRESS CONDITION THAT IT IS NOT TO BE USED FOR ANY PURPOSE OR COPIED OR COMMUNICATED TO ANY OTHER PERSON WITHOUT WRITTEN PERMISSION FROM DART AEROSPACE LTD</small>	

8 7 6 5 4 3 2 1

NCR: Yes / No

WORK ORDER NON-CONFORMANCE / UPDATE

DQA: _____ Date: _____

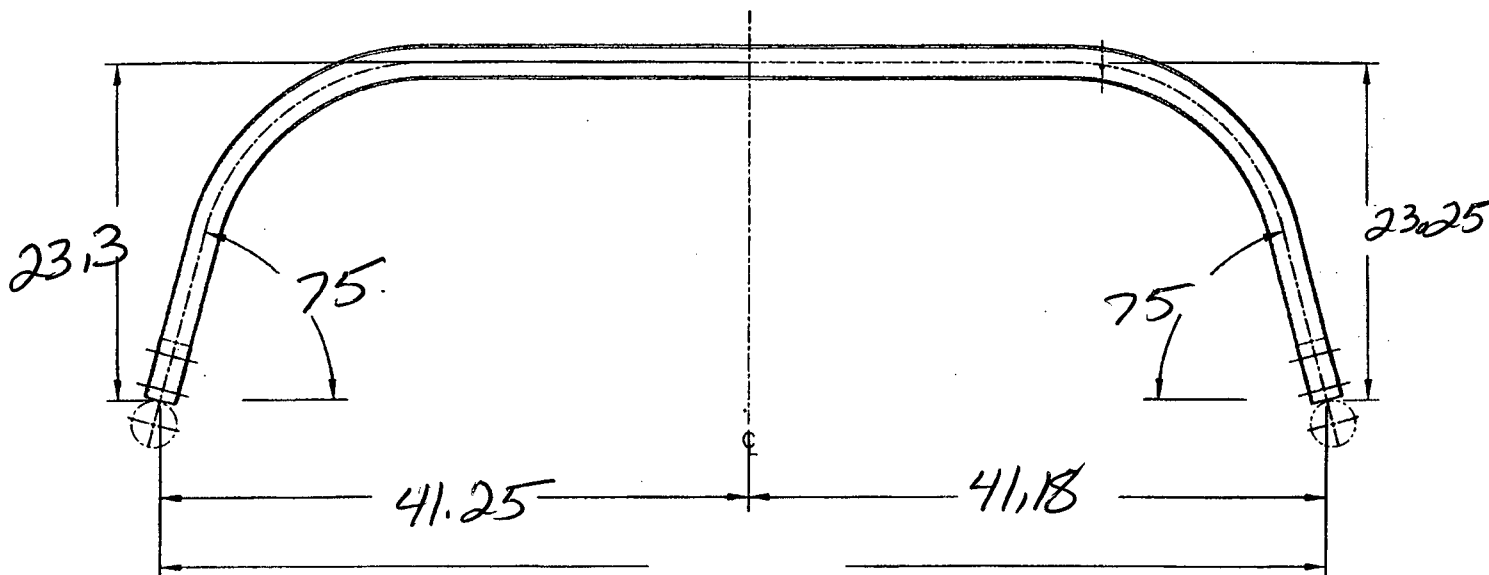
QA Closed: _____ Date: _____

Work Order: _____ Part No. _____ NCR No. _____				DISPOSITION Rework <input type="checkbox"/> Scrap <input type="checkbox"/> Use-as-is <input type="checkbox"/> Work Order Update <input checked="" type="checkbox"/>		AGAINST DEPARTMENT/PROCESS <div style="display: flex; justify-content: space-between;"> <div> Skid-tube <input type="checkbox"/> Machining <input type="checkbox"/> Thermoforming <input type="checkbox"/> Large Fab <input type="checkbox"/> </div> <div> Crosstube <input type="checkbox"/> Small Fab <input type="checkbox"/> Finishing <input type="checkbox"/> Composite <input type="checkbox"/> </div> <div> Water Jet <input type="checkbox"/> Prod. Eng. Coord. <input type="checkbox"/> Rec/Store/Packaging <input type="checkbox"/> Supplier <input type="checkbox"/> </div> <div> Engineering <input type="checkbox"/> Quality <input type="checkbox"/> Other <input type="checkbox"/> </div> </div>					
THIS LOG ONLY											
Root Cause	Date	Step	Qty	Description of work order update or Non-conformance	Initial Chief Eng	Action Description	Sign & Date	Verification	QC Inspector		
Doc/Data <input type="checkbox"/>	12/7/16	161	1	LOAD TEST TUBE TO SEND 12 FOR 1 MINUTE	CP 12/7/15						
Equip/Tooling <input type="checkbox"/>											
Operator <input type="checkbox"/>											
Material <input type="checkbox"/>											
Setup <input type="checkbox"/>	12/7/16	162	1	NDT TUBE	CP 12/7/15						
Other <input type="checkbox"/>											
Process <input type="checkbox"/>											
Supplier <input type="checkbox"/>											
Training <input type="checkbox"/>											
Unapproved <input type="checkbox"/>											
FAULT CATEGORY											
Landing Gear			General								
<input type="checkbox"/>	Bending	<input type="checkbox"/>	Bend	<input type="checkbox"/>	Grain	<input type="checkbox"/>	Ovalized	<input type="checkbox"/>	Pressure/Forced		
<input type="checkbox"/>	Centre Not Concentric to O/S	<input type="checkbox"/>	BOM/Route	<input type="checkbox"/>	Hardware	<input type="checkbox"/>	Over/Under tolerance	<input type="checkbox"/>	Temperature/Cure		
<input type="checkbox"/>	Cracks	<input type="checkbox"/>	Broken/Damaged	<input type="checkbox"/>	Inspection Incomplete	<input type="checkbox"/>	Part Incorrect	<input type="checkbox"/>	Weld		
<input type="checkbox"/>	Crushed/Crimped	<input type="checkbox"/>	Burrs	<input type="checkbox"/>	Instructions Incomplete/Unclear	<input type="checkbox"/>	Part Lost/Missing	<input type="checkbox"/>	Wrong Stock Pulled		
<input type="checkbox"/>	Cuffs	<input type="checkbox"/>	Contamination	<input type="checkbox"/>	Maintenance	<input type="checkbox"/>	Part Moved				
<input type="checkbox"/>	Heat Treat	<input type="checkbox"/>	Countersink	<input type="checkbox"/>	Mislabeled	<input type="checkbox"/>	Positioned Wrong				
<input type="checkbox"/>	Inspection Strip in Tube	<input type="checkbox"/>	Cut Too Short	<input type="checkbox"/>	Misread	<input type="checkbox"/>	Power Loss/Surge	<input type="checkbox"/>	Other		
<input type="checkbox"/>	Ripples in Bend	<input type="checkbox"/>	Drill Holes	<input type="checkbox"/>	Offset						
<input type="checkbox"/>	Torque Waves in Extrusion	<input type="checkbox"/>	Drawing	<input type="checkbox"/>	Out of Calibration						
<input type="checkbox"/>	Turning Sequence	<input type="checkbox"/>	Finish	<input type="checkbox"/>	Out of Sequence						
<input type="checkbox"/>	Wave/Twist in Tube	<input type="checkbox"/>	Folio	<input type="checkbox"/>	Outside Dimensions						

Measured Before De-Stress

DART AEROSPACE LTD		Work Order:	87334
Description: Crosstube High Fwd (AS350/355)		Part Number:	D350-748-101
Inspection Dwg: D350-748-141	Rev: F	Page 1 of 1	

Required Dimension	Min	Max
Height	23.12	23.38
1/2 Span	40.77	41.03
Angle	75	77
Total Span	81.55	82.05
Bending Passes	7	--
Crushing	--	6%
Twist	--	0.25



	Side A	Side B
Bending Passes	36	38
Crushing		
Comments		
TWIST- 0.095		

QC15 Inspection	
Date	

Rev	Date	Change	Revised by	Approved
A	07.02.06	New Issue	KJ/JM	
B	10.08.23	Dwg Rev updated	KJ	
C	11.11.07	Dwg Rev updated	KJ	
D	12.04.16	Added bending, crushing & twist dimensions	KJ	

NCR: Yes / No

WORK ORDER NON-CONFORMANCE / UPDATE

DQA: _____ Date: _____

QA Closed: _____ Date: _____

Work Order: _____ Part No. _____ NCR No. _____	DISPOSITION Rework <input type="checkbox"/> Scrap <input type="checkbox"/> Use-as-is <input type="checkbox"/> Work Order Update <input type="checkbox"/>	AGAINST DEPARTMENT/PROCESS <table style="width: 100%;"> <tr> <td>Skid-tube <input type="checkbox"/></td> <td>Crosstube <input type="checkbox"/></td> <td>Water Jet <input type="checkbox"/></td> <td>Engineering <input type="checkbox"/></td> </tr> <tr> <td>Machining <input type="checkbox"/></td> <td>Small Fab <input type="checkbox"/></td> <td>Prod. Eng. Coord. <input type="checkbox"/></td> <td>Quality <input type="checkbox"/></td> </tr> <tr> <td>Thermoforming <input type="checkbox"/></td> <td>Finishing <input type="checkbox"/></td> <td>Rec/Store/Packaging <input type="checkbox"/></td> <td>Other <input type="checkbox"/></td> </tr> <tr> <td>Large Fab <input type="checkbox"/></td> <td>Composite <input type="checkbox"/></td> <td>Supplier <input type="checkbox"/></td> <td></td> </tr> </table>	Skid-tube <input type="checkbox"/>	Crosstube <input type="checkbox"/>	Water Jet <input type="checkbox"/>	Engineering <input type="checkbox"/>	Machining <input type="checkbox"/>	Small Fab <input type="checkbox"/>	Prod. Eng. Coord. <input type="checkbox"/>	Quality <input type="checkbox"/>	Thermoforming <input type="checkbox"/>	Finishing <input type="checkbox"/>	Rec/Store/Packaging <input type="checkbox"/>	Other <input type="checkbox"/>	Large Fab <input type="checkbox"/>	Composite <input type="checkbox"/>	Supplier <input type="checkbox"/>	
Skid-tube <input type="checkbox"/>	Crosstube <input type="checkbox"/>	Water Jet <input type="checkbox"/>	Engineering <input type="checkbox"/>															
Machining <input type="checkbox"/>	Small Fab <input type="checkbox"/>	Prod. Eng. Coord. <input type="checkbox"/>	Quality <input type="checkbox"/>															
Thermoforming <input type="checkbox"/>	Finishing <input type="checkbox"/>	Rec/Store/Packaging <input type="checkbox"/>	Other <input type="checkbox"/>															
Large Fab <input type="checkbox"/>	Composite <input type="checkbox"/>	Supplier <input type="checkbox"/>																

Root Cause	Date	Step	Qty	Description of work order update or Non-conformance	Initial Chief Eng	Action Description	Sign & Date	Verification	QC Inspector
Doc/Data									
Equip/Tooling									
Operator									
Material									
Setup									
Other									
Process									
Supplier									
Training									
Unapproved									

FAULT CATEGORY

Landing Gear <input type="checkbox"/> Bending <input type="checkbox"/> Centre Not Concentric to O/S <input type="checkbox"/> Cracks <input type="checkbox"/> Crushed/Crimped <input type="checkbox"/> Cuffs <input type="checkbox"/> Heat Treat <input type="checkbox"/> Inspection Strip in Tube <input type="checkbox"/> Ripples in Bend <input type="checkbox"/> Torque Waves in Extrusion <input type="checkbox"/> Turning Sequence <input type="checkbox"/> Wave/Twist in Tube	General <input type="checkbox"/> Bend <input type="checkbox"/> BOM/Route <input type="checkbox"/> Broken/Damaged <input type="checkbox"/> Burrs <input type="checkbox"/> Contamination <input type="checkbox"/> Countersink <input type="checkbox"/> Cut Too Short <input type="checkbox"/> Drill Holes <input type="checkbox"/> Drawing <input type="checkbox"/> Finish <input type="checkbox"/> Folio	<input type="checkbox"/> Grain <input type="checkbox"/> Hardware <input type="checkbox"/> Inspection Incomplete <input type="checkbox"/> Instructions Incomplete/Unclear <input type="checkbox"/> Maintenance <input type="checkbox"/> Mislabeled <input type="checkbox"/> Misread <input type="checkbox"/> Offset <input type="checkbox"/> Out of Calibration <input type="checkbox"/> Out of Sequence <input type="checkbox"/> Outside Dimensions <input type="checkbox"/> Ovalized <input type="checkbox"/> Over/Under tolerance <input type="checkbox"/> Part Incorrect <input type="checkbox"/> Part Lost/Missing <input type="checkbox"/> Part Moved <input type="checkbox"/> Positioned Wrong <input type="checkbox"/> Power Loss/Surge <input type="checkbox"/> Pressure/Forced <input type="checkbox"/> Temperature/Cure <input type="checkbox"/> Weld <input type="checkbox"/> Wrong Stock Pulled <input type="checkbox"/> Other
-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------	-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------	----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------

METCOR INC.

560 BOUL. ARTHUR-SAUVÉ
ST-EUSTACHE, QC, J7R 5A8

Tel: 450-473-1884 / Fax: 450-491-5498

Certificat de Conformité Détaillé

Detailed Certificate of Compliance

BON DE TRAVAIL order	CHARGEMENT load
183242	1

CLIENT / customer 215

DART AEROSPACE
1270 ABERDEEN
HAWKESBURY

ON K6A 1K7

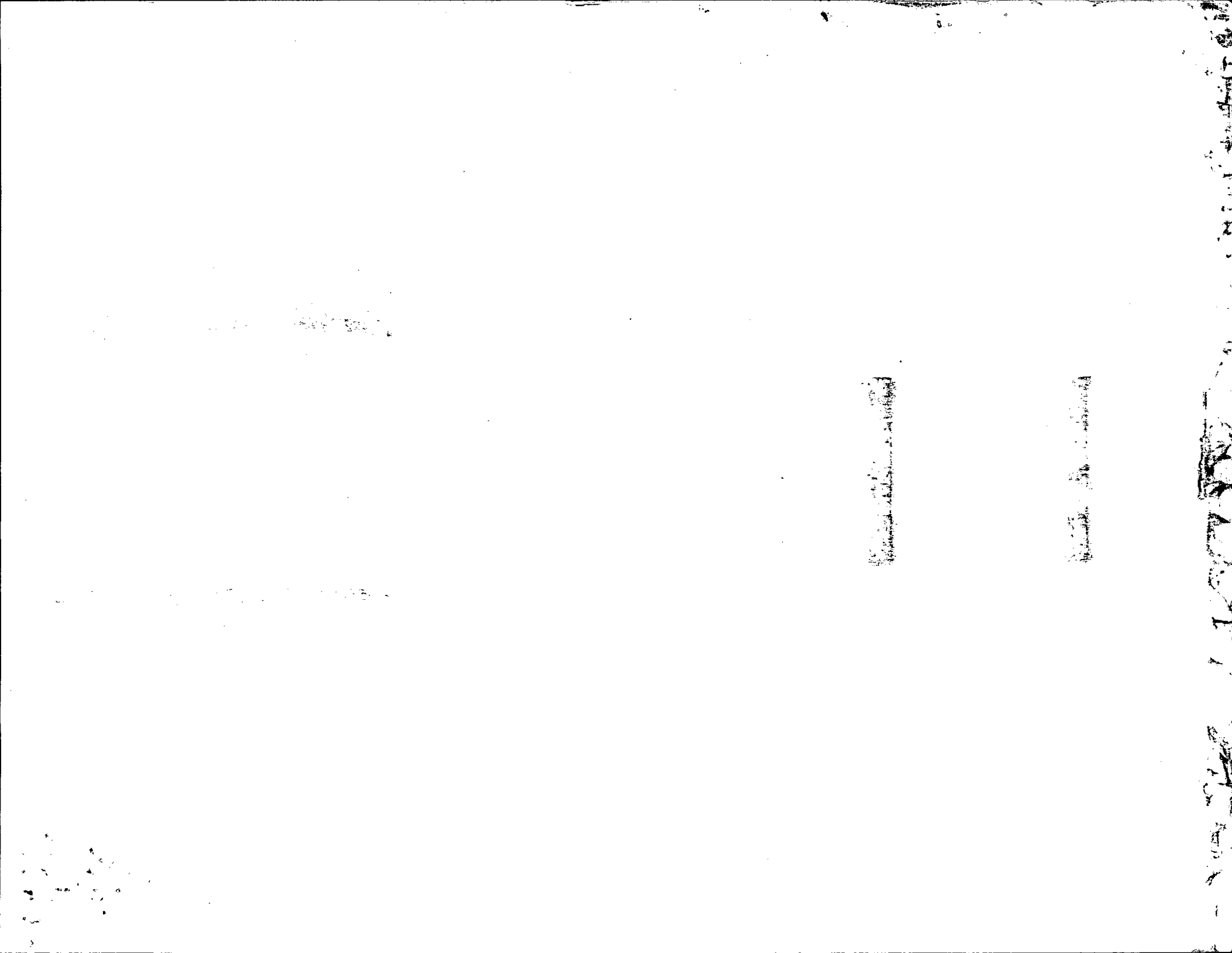
LIVRÉ À / shipped to:

DART AEROSPACE
1270 ABERDEEN
HAWKESBURY

ON K6A 1K7

1

COMMANDE DU CLIENT customer po	BON DE LIVRAISON DU CLIENT customer shipper no.	MATÉRIEL material	CODE DE TRAITEMENT mat'l heat code	NUMÉRO DE LOT lot number						
PC18998										
SPÉCIFICATIONS DU PROCÉDÉ processing specifications										
STRESS REL										
SAE AMS 2759/1 REV.E										
EXIGENCE / requirement SPÉCIFICATIONS / specified TESTS EXÉCUTÉS / performed RÉSULTATS DE TESTS / results										
Visual										
QUANTITÉ quantity	POIDS weight	DESCRIPTION DES PIÈCES parts description								
4	120	D350-748-101 CROSSTUBE (1) CROSSTUBE REFERENCE 94598 (1) D350-748-101 CROSSTUBE REFERENCE 94600 (1) D350-748-101 CROSSTUBE REFERENCE 87334 (1) D350-748-101 CROSSTUBE REFERENCE 94599 CONTENANT: 1 NIL								
Operation	Temp. spécifiée Specified Temp	Temps de trempe Spécifié Specified Soak Temp	Atmosphère	Carbone Carbon Potential	Q-Media Q-Temp	Four # Furnace #	Date Départ Start Date	Heure d'entrée Time In	Heure de sortie Time Out	Date Complétée Date complete
1.00 CONT. INIT.	LAVAGE		si nécessaire							
2.00 PREPARING	COMPTAGE									



METCOR INC.

560 BOUL. ARTHUR-SAUVÉ
ST-EUSTACHE, QC, J7R 5A8

Tel: 450-473-1884 / Fax: 450-491-5498

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Detailed Certificate of Compliance

BON DE TRAVAIL order	CHARGEMENT load
183242	1

CLIENT / customer 215

DART AEROSPACE
1270 ABERDEEN
HAWKESBURY

ON K6A 1K7

LIVRÉ À / shipped to:

DART AEROSPACE
1270 ABERDEEN
HAWKESBURY

ON K6A 1K7

Operation	Temp. spécifiée Specified Temp	Temps de trempe Spécifié Specified Soak Temp	Atmosphere	Carbone Carbon Potential	Q-Media Q-Temp	Four # Furnace #	Date Départ Start Date	Heure d'entrée Time In	Heure de sortie Time Out	Date Complétée Date complete
3.00 STRESS RE	43°C+/-6°C	2:00	air			701				
4.00 FINAL INSP							02-01-2013			02-01-2013

COMMENTAIRES / comments

LES TRAITEMENTS THERMIQUES SUR CETTE COMMANDE A ÉTÉ FAIT EN UTILISANT DES ÉQUIPEMENTS EN CONFORMITÉ AVEC LES REQUIS DE LA SPÉCIFICATION AMS2759.
TOUTES LES OPÉRATIONS DE TRAITEMENT THERMIQUE ONT ÉTÉ FAITES EN CONFORMITÉ AVEC LES REQUIS DE LA SPÉCIFICATION DEMANDÉE ET TOUTES LES VÉRIFICATIONS ET LES TESTS DEMANDÉES ONT ÉTÉ FAITES ET DOCUMENTÉES.
AUCUN CHANGEMENT OU DÉROGATION N'A ÉTÉ FAITE PAR RAPPORT AU TRAITEMENT THERMIQUE DEMANDÉ. ON CERTIFIE QUE LE MATÉRIEL A ÉTÉ FABRIQUÉ, ÉCHANTILLONNÉ, TESTÉ ET INSPECTÉ EN ACCORD AVEC LES SPÉCIFICATIONS DU MATÉRIEL ET LE BON DE COMMANDE ET LE MATÉRIEL RENCONTRE LES EXIGENCES SPÉCIFIÉS.

ACCOMPLISHED USING HEAT TREATMENT EQUIPMENT THAT MEETS THE REQUIREMENTS OF AMS 2759. ALL THE HEAT TREATMENT OPERATIONS WERE ACCOMPLISHED IN ACCORDANCE WITH THE REQUESTED/REQUIRED HEAT TREATMENT SPECIFICATION AND ALL REQUIRED VERIFICATIONS TEST HAVE BEEN PERFORMED AND DOCUMENTED. NO UNAUTHORIZED CHANGES OR ALL THE HEAT TREATMENT PROCESSING PERFORMED ON THIS ORDER WAS DEVIATIONS TO REQUIRED HEAT TREATMENT SPECIFICATIONS OR PROCEDURES HAVE BEEN PERFORMED.
WE CERTIFY THAT THE MATERIAL WAS MANUFACTURED, SAMPLED, TESTED AND INSPECTED IN ACCORDANCE WITH THE MATERIAL SPECIFICATION AND THE PURCHASE ORDER AND WAS FOUND TO MEET THE REQUIREMENTS.

APPROUVÉ par / Approved by:

Isabel Gier



DATE: 2013-02-01

/ Nous certifions que toute l'information comprise sur ce rapport est exacte et conforme aux requis du client./We certify that all the information on this report is exact and in accordance with the order requirements.

CADORATH GROUP
NON CONFORMANCE REPORT

CADORATH AEROSPACE ☐

CADORATH DISTRIBUTION ☐

CADORATH COATING ☒

UNIFLYTE ☐

NOTE: THIS FORM MUST BE COMPLETED BY: CUSTOMER ☒ VENDOR ☐ BEFORE PROCESSING OF PART(S)

NCR#: **C1126**

CUSTOMER: ☒ **Dart Aerospace**

DATE: **03/05/13**

VENDOR: ☐ **N/A**

CADORATH/UNIFLYTE P/O #:

N/A

PART DESCRIPTION: **Crosstube**

CADORATH/UNIFLYTE W/O #:

121906, 121910, 121916

CUSTOMER P/O #: **19086**

PART #: **D350-748-101**

SERIAL #: **95051, 94598, 87334** QUANTITY: **THREE (3)**

PURCHASE ORDER INSTRUCTIONS: **CADMIUM PLATE IAW AMS-QQ-P-416C TYPE 2 YELLOW CLASS 1. MPI IAW ASTM-E-1414.**

DISCREPANCY: **MULTIPLE CRACKS WERE FOUND DURING FIRST MPI ON THREE CROSSTUBES.**

TRAVIS SZABO

CADORATH/UNIFLYTE INSPECTION DEPARTMENT

CUSTOMER: ☒

PLEASE COMPLETE THIS PORTION, SIGN AND RETURN TOP COPY OF THIS FORM TO CADORATH/UNIFLYTE

VENDOR: ☐

DATE: **03/05/13** P/O: **19086**

CUSTOMER INSTRUCTIONS: ☐

ATTENTION: QA-Inspection

VENDOR CORRECTIVE ACTION: ☐

AUTHORIZED SIGNATURE

NAME AND TITLE

DATE: 10/13/10

FORM: OPS 097
REVISION: 3

CADORATH GROUP
NON CONFORMANCE REPORT

CADORATH AEROSPACE ☐
CADORATH COATING ☒

CADORATH DISTRIBUTION ☐
UNIFLYTE ☐

NOTE: THIS FORM MUST BE COMPLETED BY: CUSTOMER ☒ VENDOR ☐ BEFORE PROCESSING OF PART(S)

NCR#: **C1126**

CUSTOMER: ☒ **Dart Aerospace**

DATE: **03/05/13**

VENDOR: ☐ **N/A**

CADORATH/UNIFLYTE P/O #:

N/A

PART DESCRIPTION: **Crosstube**

CADORATH/UNIFLYTE W/O #:

121906, 121910, 121916

CUSTOMER P/O #: **19086**

PART #: **D350-748-101**

SERIAL #: **95051, 94598, 87334**

QUANTITY: **THREE (3)**

PURCHASE ORDER INSTRUCTIONS: **CADMIUM PLATE IAW AMS-QQ-P-416C TYPE 2 YELLOW
CLASS 1. MPI IAW ASTM-E-1444.**

DISCREPANCY: **MULTIPLE CRACKS WERE FOUND DURING FIRST MPI ON THREE
CROSSTUBES.**

TRAVIS SZABO

CADORATH/UNIFLYTE INSPECTION DEPARTMENT

CUSTOMER: ☒

VENDOR: ☐

PLEASE COMPLETE THIS PORTION, SIGN AND RETURN TOP COPY OF THIS FORM TO CADORATH/UNIFLYTE

DATE: **03/05/13**

P/O: **19086**

CUSTOMER INSTRUCTIONS: ☐

VENDOR CORRECTIVE ACTION: ☐

ATTENTION: QA-Inspection

AUTHORIZED SIGNATURE

NAME AND TITLE

DATE: 10/13/10

FORM: OPS 097
REVISION: 3

Work Order ID	Operation Seq ID	Employee ID	Date	Setup Hrs	Run Hrs	Setup Start Time	Setup Stop Time	Run Start Time	Run Stop Time
87334	110	drou02	1/30/2013	0.0000	0.9297			1:02 PM	1:58 PM
87334	110	paqu03	1/30/2013	0.0000	0.9344			1:02 PM	1:58 PM
87334	130	OUI01	2/7/2013	0.0000	0.291675			9:00 AM	10:10 AM
87334	130	MOUS01	2/7/2013	0.0000	0.291675			9:00 AM	10:10 AM
87334	130	MOUS01	2/7/2013	0.0000	0.4986			10:49 AM	11:19 AM
87334	130	OUI01	2/7/2013	0.0000	0.5028			10:49 AM	11:19 AM
87334	130	whit01	2/7/2013	0.0000	1.4583			1:12 PM	2:40 PM
				0.0000	4.9072				

Non-Conformance Report

Printed on:

Tuesday, March 19, 2013

Details			
Raised Date 3/19/2013	Status Open	Owner Smith, Patrick Robert	Number NCR13-2390
Target Date 4/1/2013	Standard		Severity MAJOR
Source Quality Inspection		Audit	
Raised By Person Downing, Eric		Raised Against (Department or Supplier) Metcor Inc.	Fault Category Other\Supplier
Details Qty x 3 D350-748-101 cross tubes cracked during cad plaiting. all three tubes were stressed relifed past the 24 hour time of bending.D350-784-101 B94598 was bent on the 2013/01/30 @ 1:57 pm-4:38pm then was stressed relifed @2013/02/01D350-748-101 B95051 was bent on the 2013/01/31 @ 12:42pm-2:08pm then was stressed relifed @2013/02/02D350-748-101 B87334 was bent on the 2013/01/30 @ 1:01pm-1:58pm then was stressed relifed @2013/02/01			
Product D350-748			
Document		Root Cause Supplier	
Closed By	Closed Date	Resolution	

Corrective Action			
Target Date 4/1/2013	Owner Forbes, Nigel	Closed Date	Closed By
Details			

Actions			
Number	Owner	Target Date	Completed Date
Details		Response	
1	Downing, Eric	3/29/2013	13-03-26 TW
scrap all three tubes due to cracking			
2	Downing, Eric	3/29/2013	
inform METCOR of the issue and request a visit from the QC department			
3	Downing, Eric	3/29/2013	
send copy of this NCR to METCOR			

4	Smith, Patrick Robert	3/29/2013	
review all findings			

Verification & Review

Target Date	Owner	Closed Date	Closed By
3/23/2013			
Details			

Actions

Number	Owner	Target Date	Completed Date
Details		Response	